

City of Burien

15811 Ambaum Blvd. SW Suite C, Burien, WA 98166 (206) 988-3714 **BUSINESS LICENSE APPLICATION**

The Business License is valid from August 1st through July 31st

Annual Fees: \$150 - 40+ employees, \$75 - 0-39 employees, \$30 - Home Occupations Pro-rated fee for licenses from February 1st - July 31st is 50% of annual fee ALL BUSINESS LICENSE APPLICATION FEES ARE NON-REFUNDABLE

A. Business Information					
Legal Business Name:	Jnified Busi	Inified Business ID (UBI)			
Doing business as (if different than legal n	name)				
Business Address (do not use building nat	me)	City	State	Zip Code	
Business Mailing Address (if different than	business address)	City	State	Zip Code	
() Business Telephone Number	() Business Telephone Number () Business Fax Number		Email Address		
Business Owner's Name:			Owner's Phone #		
Business Owner's Address		City	State	Zip Code	
Please indicate your type of business.	Sole Proprietorship Corporation		Partnership	LLC	
Nature of business					
Number of employees: Full-time	Part-time	_			
State Industrial Classification Code		See list ii —	n Application Packet		
Professional License Number		(contract	or, cosmetology, mass	euse, etc.)	
Health Department Permit Number		Attach a	copy of the permit to th	is application	
Are you claiming Non-Profit or Gov't Statu	s? Yes No	If yes, att	tach proof of non-profit	status	
Is your business located within City Limits	? Yes No	If yes, fill out section B			
()					
Emergency Contact Phone Number	Emergency Contact Name				
application has been approved. OPER	eation does not indicate approval of your	USINESS L	ICENSE IS A VIOLAT	ION OF CITY LAW.	
a civil judgment based upon fraud, misrep statutes, or had any other judgment or cea	ted of a crime which relates directly to the laresentation, violation of the Washington Coase and desist order or consent degree relative and accurate. I understand my place	nsumer Pro iting to busi	otection Act or similar s ness activities. I furthe	tate or federal r attest the	
and ordinances and the business license a	application fee is non-refundable.				
SIGNATURE OF APPLICANT		DATE			
City of Burien Use Only	Check Number				
Special License Fee	Date Paid	_			
Business License Fee Total Amount Paid	License Number Comments	_			

B.	Business Information for businesses located within Burien city lin	mits.		
Α	oproximate date business opened at this address			
_	operty Owner Name	(Dror) perty Owner Telephone Nur	whor
P	openy Owner Name	PIOL	berty Owner Telephone Nur	nbei
Р	operty Owner Mailing Address	City	State	Zip Code
N	ature of <i>previous</i> business (if known)		Approx date close	ed
Ν	umber of employees: Full-time Part-	time		
Is	business operated from a residence within City Limits?	☐ No	If yes, fill out Se	ction C
C.	Business Information for businesses conducted from a residence Please be advised that your property may contain legally binding a permitted on a lot or within a residence. The City of Burien is advising restrictions prior to filling an application. Violation of private covenant initiating civil legal action.	ovenant g applica	s and/or restrictions go ants to research any priv	ate covenants or
1	I have been provided a copy of Section 19.17.090 of the Burien Zoning Code ar	nd unders	tand its contents.	
2	Explain in detail the type of home occupation requested. Please include specifitransferred to the client.	c informa	Yes tion on how the product or s	No No service provided is
				_
3	Does your business utilize machinery and/or use or store hazardous substances	s?	Yes	No
	If yes, please describe:			
4	Will there be outdoor storage of materials related to the home occupation?	Yes	No No	
	If yes, please describe:			
5	What is the gross floor area of your dwelling unit and accessory buildings on yo What is the total floor area devoted to home occupation?	ur lot?		sq. ft. sq ft.
6	Will there be any activities of the home occupation conducted outside?	Yes	No No	
	If yes, please describe:			
				_
7	Number of employees: Resident Non-resi	dent		
8	Will additional parking areas be provided on site? If yes, please include a site plan	Yes	No No	
9	Will the home occupation include sales of products or merchandise?	Yes	No No	
	If yes, please explain the nature of the product:			
10	Will customers visit the residence?	Yes		
	If yes, please explain how many customers visit the residence on a daily basis a	and at wh	at time of day.	
11	Does the home occupation require the use and/or storage of a vehicle for pick-uproducts from the site? If yes, provide vehicle size and capacity information and proposed on-site parking.	Yes	No No	elow.

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D	siness Information for business	as aandustad from a re	sidonoo witi	hin Burion (oc	ant l	
				•	,	
12	Is there any electrical or mechanical e		occupation tha	at result in any of		□No
	A change to the fire rating of the struct		at located off n	romico?	Yes Yes	∐No □No
	Interference in radio or television rece Fluctuations in the line voltage off-prei		ii iocaled oii-p	rennse :	Yes	
	0 1					
13	Will the utility demands of the home of	•	electricity, garb	page	Yes	No
	or natural gas exceed normal resident	iai ieveis!				
	If yes, please explain:					
	neral Conditions for Home Occu					
(1)	Retail sales shall be limited to items poccupation.	roduced on site or incidenta	I sales of items	s associated with	a service provide	d by the Home
(2)	Customers visiting the Home Occupat			•	than one custome	er may be at the
(3)	residence at any one time and no mor Deliveries to the Home Occupation are		•	one day.		
	The Home Occupation shall not create	•	-	oke that is disce	nible at the proper	rty lines and is
(5)	offensive to a reasonable person. The Home Occupation shall not create	noise exceeding 55 decibe	als at the prope	arty line from 8 a	m to 8 nm or any n	noise discernible by
(0)	the human ear at the property lines fro	-		•	•	ioloc diocernible by
	The Home Occupation shall not change				-	•
(7)	The Home Occupation shall not use o UBC and UFC.	r store hazardous substanc	es in excess of	those normally	allowed in a reside	ential area under the
(8)	The Home Occupation shall not create	e any electrical, magnetic or	other interfere	ence off the prem	ises.	
(9)	The Home Occupation shall not consu	me utility quantities that ne	gatively impact	the delivery of u	itilities to the surro	unding properties.
	SIGNATURE OF APPLICANT (for businesses conducted from a r	esidence within Burien ci	ty limits)		DATE	
	City of Burion Hoo Only					
	City of Burien Use Only			<u> </u>		
	PLANNING DEPARTMENT			Approve	Deny	
	Parcel Number	Zoning District	-	Reviewed By		Date
	Drimon Land Ha			A		
	Primary Land Use Previous Use(s)		Dates of prov	ious operation	sory Land Use(s)	
	Permitted Use?	Yes No	_Dates of prev		- conforming	_
		= -		=	n-conforming	
	Parking and landscaping	Acceptable (incl. non-o	conforming)		nts required	
	Home Occupation Permit Approved?	Yes No		N/A		
	Notes:					
	BUILDING DEPARTMENT			Approve	Deny	
	New Construction Permit #	Tenant Improvement Perr	nit #	Reviewed By		Date
			_			
	Occupancy Permit	Occupant Load		Occupancy Gr	oup	
	Notes:					
	Fire Department	Approve		Deny		
	<u> </u>	_		-		
	Police Department	Approve		Deny		
	Date of notice sent to abutting residen	ts and across the street 300)-feet in both d	irections:		